

## Action Plan: Community Projects on Health Education

Commissioners Names: Gallegos, Napoleon, and Ward

District: 3

Name of Community Organization: MEND

Name of Project Coordinator: Gallegos

### I. Alignment with LAACW Goals for 2008-2010

- ☒ Goal 1: Empower, Influence and help women to forge ahead acquiring better access to healthcare
- ☐ Goal 2: Empower, influence and forge ahead by enhancing our economic position

☐ Goal 3: Empower, influence and support women to forge ahead to reach gender equity in the workplace

Specific  
Measurable  
Attainable  
Results  
Timeline

### II. Proposed goals, plans, target dates for completion:

Goal	Action Steps	Target Date for Completion	Responsible party
Provide free access to health care for patients at high risk for hypertension and diabetes.	Present a Health Fair for approximately 200-300 high risk patients (70% female) including health screenings, required lab tests and informational booths to educate the community.	July 16, 2011	A11
Partner with established community based organization to leverage resources.	MEND has been selected as a partner in this project. They have a medical clinic and staff to conduct the event. They do not have funding for additional lab testing and equipment.	July 16, 2011	All



# Los Angeles County Commission for Women



## APPLICATION FOR DONATION

*All requests for funds must be received 30 days prior to the next scheduled LACCW meeting (see attached meeting schedule). The requesting organization must provide the following information before consideration of a request.*

### MEND

Name of Organization

10641 San Fernando Road

Pacoima

91331

Address

City

Zip

(818) 899-0246

(818) 897-5642

www.mendpoverty.org

Telephone Number

FAX Number

Website Address

Marianne Haver-Hill

President & CEO

Contact Person

Title

marianne@mendpoverty.org

Cell (optional)

E-mail

Organizational Identification

(Non-profit status/tax I.D. number): On file

Mission of Organization (Purpose and Goals):

With dignity and respect, powered by volunteers, MEND's mission is to break the bonds of poverty by providing basic human needs and a pathway to self-reliance.

History of Organization and Time of Existence:

In the early 1970's, MEND (Meet Each Need with Dignity) opened its doors in an effort to transform the lives of the neediest residents of the San Fernando Valley - poor children and their struggling families. Starting as a small group of volunteers working from a garage, MEND has grown primarily by word-of-mouth into one of the leanest operating non-profit organizations in existence. More than 91% of the support and donations received by MEND, now the largest poverty agency in the Valley, provides emergency food, clothing, medical, vision and dental care, job skills training and job placement assistance, English as a Second Language classes, youth activities, and a Christmas program. In 2010, we served as many as 32,000 individuals per month.

**Los Angeles County Commission for Women**  
**APPLICATION FOR DONATION**  
**(Page 2)**

**Listing of Board of Directors:**

**Officers**

Chair Adriana Barrera, PhD, LA Community College District; First Vice Chair Susan Ng, Kaiser Permanente;  
 Second Vice Chair Stacy Geere, The Geere Group; Treasurer Steve Brown, Fiesta Plaza Nutritional Products;  
 Secretary Gigi Gomez, Community Volunteer; Past Chair Ron Villafana, State Compensation Insurance Fund

**Event Information – Date/Time, Location and Target Number of Attendees:**

Date/Time: July 16, 2011

Location: MEND

Target Number of Attendees: 200-300 (70% female patients)

**Event Information – Purpose and Goals:**

\* Event publicity materials may be included (optional)

Health fair for approximately 200-300 high risk patients (70% female) including health screenings and lab tests to be offered at no cost to the patient. Informational booths will also be available as well as classes on health education, dental hygiene and nutrition.

In what Los Angeles County District will this event take place?  
 (Please enter the district number)

3

In what Los Angeles County District does your organization belong to?  
 (Please enter the district number)

3

Constituency served within Los Angeles County (age, gender, ethnicity, income level, geographical region, etc.):

The constituents served will be 18+ years old, approximately 70% female, of Hispanic and African American origin, from low income households in the Northeast San Fernando Valley.

**Specific Request (i.e. monetary contribution, use of LACCW's name or logo, access to mailing resources, and/or staff assistance)**

Request is for \$1000.00.



**Los Angeles County Commission for Women**  
**APPLICATION FOR DONATION**  
**(Page 3)**

How will this donation benefit the organization?

The donation will be used to rent equipment for screenings and to provide lab tests at no cost to the patients.

Have you received donation funds from LACCW before? If yes, please specify the event, time, and amount of donation. If more than once, please specify the two most recent occasions.

No ( ), this is the first time we received donation from LACCW.

Yes (✓), we have received donation(s) from LACCW previously.

First Occasion:

Name of the Event Mending Poverty Conference

Date of the Event: June 2010

Donation Amount: \$1000.00

Second Occasion:

Name of the Event \_\_\_\_\_

Date of the Event: \_\_\_\_\_

Donation Amount: \_\_\_\_\_

**Please send this form to:**

**Los Angeles County Commission for Women**  
**500 W. Temple Street, Rm. B-50, Los Angeles, CA 90012**

**PH: 213-974-1455**

**FAX: 213-633-5102**

**[www.laccw@bos.lacounty.gov](mailto:www.laccw@bos.lacounty.gov)**

**For CW Office Only:**

(Yes ) (No )

Place on Agenda: \_\_\_\_\_

Reason for not placing on agenda \_\_\_\_\_

Date Received Received By Date of Review Reviewed By

***Los Angeles County Commission for Women***  
**APPLICATION FOR DONATION**  
**(Page 4)**

_____	(Yes____) (No____)	(Yes____) (No____)	_____
Date of CW Board Meeting	Action Taken	Notification Sent	Amount Approved

Reason for Rejection
